



SCHOOL OF NURSING & HEALTH STUDIES

Master of Science in Nursing Student Handbook 2011-2012

Note: All MSN Students admitted Fall 2011 will be subject to the curriculum revision scheduled for implementation in Fall 2012.

Foreword

Dear Student:

Welcome to the University of Miami School of Nursing and Health Studies.

We have prepared this ***Master's of Science in Nursing Handbook*** to provide you with information about academic and general student matters that can facilitate your learning experiences and interactions here at the University of Miami School of Nursing and Health Studies.

Other publications that will help you are the ***University of Miami Bulletin*** and the ***University of Miami Students Rights and Responsibilities Handbook***. These publications are available at the School of Nursing and Health Studies and the Graduate School.

The faculty and staff are here to help you succeed in your master's nursing education. Please feel free to consult with us if you need further information or clarification of any content in this *Handbook*.

Wishing you a successful school year,

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Professor and Dean

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Table of Contents

OVERVIEW OF THE SCHOOL OF NURSING AND HEALTH STUDIES	1
HISTORY	2
MISSION STATEMENT.....	2
ACCREDITATION	2
TECHNICAL STANDARDS	3
MSN PROGRAM OUTCOMES	4
ADVISEMENT AND REGISTRATION.....	4
CHANGE OF SPECIALTY.....	5
GRADING POLICY	5
PROGRESSIONS POLICY	6
PROFESSIONAL BEHAVIOR.....	6
LOCK-STEP PROGRAMS POLICY	8
COURSE AND CLASSROOM REQUIREMENTS.....	9
TRANSFER OF CREDITS	8
SYLLABI.....	8
TEXTBOOKS	9
ATTENDANCE.....	9
REFERENCE MANUAL FOR WRITING PAPERS	9
LEAVES OF ABSENCE AND READMISSION.....	9
ACADEMIC HONESTY POLICIES	9
ETHICS	9
HONOR CODE	10
PLAGIARISM.....	10
Distance Learning User Verification Policy.....	11
PROBATION POLICY	11
RESOLVING ACADEMIC DISPUTES AND SOLVING PROBLEMS	12
DISMISSAL POLICY.....	12
GRADUATE STUDENT ACADEMIC APPEALS	13
CLINICAL EXPERIENCE GUIDELINES	18
REQUIREMENTS PRIOR TO STARTING CLINICAL COURSES	18
<i>Florida RN License</i>	18
<i>Physical Examination</i>	19
<i>Background Check, Fingerprinting and Drug Testing Clearance</i>	19
<i>Cardiopulmonary Resuscitation (CPR) Certification</i>	19
<i>Immunizations</i>	19
<i>Drug Screening</i>	20
CLINICAL AGENCY REQUIREMENTS	20

CLINICAL ATTIRE.....	20
LATEX ALLERGY POLICY	20
MEDICAL CENTER IDENTIFICATION	21
TRANSPORTATION TO CLINICAL SITES.....	21
HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA).....	21
IMPAIRED STUDENT POLICY.....	21
POLICY FOR SAFE PRACTICE IN CLINICAL SETTINGS.....	25
PRECAUTIONS TO PREVENT TRANSMISSION OF HIV – CDC UNIVERSAL PRECAUTIONS	26
EXPOSURE CONTROL POLICY.....	26
COMPUTER LAB.....	31
GRADUATE STUDENT ORGANIZATIONS	31
GRADUATE STUDENT ASSOCIATION (GSA)	31
SCHOOL OF NURSING AND HEALTH STUDIES COMMITTEES	31
SIGMA THETA TAU INTERNATIONAL HONOR SOCIETY OF NURSING (BETA TAU CHAPTER)	32
GRADUATION	32
APPLYING FOR GRADUATION.....	32
IMPORTANT PHONE NUMBERS	33
PLANS OF STUDY	34
PLAN OF STUDY – NURSE ANESTHESIA.....	34
PLAN OF STUDY – ACUTE CARE/ADULT NURSE PRACTITIONER (4-SEMESTER AND 7-SEMESTER PLANS)..348	
PLAN OF STUDY – FAMILY NURSE PRACTITIONER - 1 AND 2-YEAR PLANS	37
Plan of Study -Clinical Nurse Education.....	39

OVERVIEW OF THE SCHOOL OF NURSING AND HEALTH STUDIES

The School of Nursing and Health Studies is an integral part of the University of Miami and shares in the responsibility to facilitate the development of humanistic and intellectual capabilities of individuals to meet the challenges of a world increasingly characterized by science, technology and resource conservation. The ongoing interaction between the School of Nursing and Health Studies community and the University community serves to complement the functions of each through the exchange of resources, including the collective abilities of faculty and students.

The School serves a multicultural, international community that affords a rich environment for the exchange of ideas necessary for the advancement of nursing knowledge and the promotion of global health. The faculty believes nursing educators have a responsibility to prepare students to act as culture advocates and brokers for clients and health care providers in a diverse community. The School is committed to academic excellence in teaching, practice, and scholarly inquiry for the advancement of nursing as a discipline and service to society through its baccalaureate, graduate and continuing education programs.

Each person is a unique, integrated, holistic human being who is influenced by the complex interaction of biological, psychological, developmental, sociological, economic and cultural variables. Each individual functions in continuous interaction with a constantly changing environment. Each person is an integral part of a family and community in a multicultural society. Changes in the cultural, economic, technological, political, and sociological environment affect the health care delivery system as well as the health care needs and expectations of clients. Access to health care is a basic right. Health and health alterations are dimensions of life that form a continuum within each person, group and community, can be located. Health is defined as the quality of life as measured by an ever-expanding level of well-being. Health results when energy is mobilized for the promotion, maintenance, and/or restoration of well being. The goal of health promotion and disease prevention is to facilitate the expansion of health regardless of level of functioning by acknowledgment of life-style choices, advocacy and decision-making.

Professional nursing is an integral component of the health care system and is vital to the delivery of health care to individuals, families, groups, and communities. Nursing care includes health promotion, health maintenance, illness prevention and treatment, rehabilitation, and palliation. Professional nursing knowledge rests on a foundation of arts and humanities, and natural and behavioral sciences that are developed outside or within the discipline of nursing. The faculty is committed to the advancement of knowledge. Nursing science is generated by ongoing development and testing of nursing theory.

Nursing science and nursing practice are reciprocal in nature, with each including independent and collaborative functions and actions. The professional nurse assumes a leadership role and is accountable to self, client, and society. Graduates of the School are expected to create innovative nursing roles within the changing health care system to meet emerging health care needs of clients across the life span.

Professional nursing requires a commitment to life-long learning, which results from interaction between the individual and environment. Faculty and students share responsibility to create a learning environment that stimulates intellectual curiosity, critical thinking, decision-making, and

self-directed action. Students enter nursing education at various levels based on their personal backgrounds and career goals. Independent learning and flexibility are encouraged in meeting program objectives. Evaluation, as part of the teaching/learning process, promotes growth and provides direction for improvement of nursing practice, education, and research.

History

Nursing education began at the University of Miami in 1948 with registered nurses admitted to the College of Arts and Sciences for the Bachelor of Science in Nursing (BSN). In 1952, the nursing program became a Department of Nursing within the College and began admitting generic nursing students. The BSN program was approved in 1954 by the Florida State Board of Nursing and Registration. The BSN program received initial national accreditation by the National League for Nursing in May 1956. In 1968, Nursing was transferred to the Medical Center and became a school, reporting to the vice-president for Medical Affairs.

In 1976, seventeen students were enrolled in the new Master of Science in Nursing (MSN) program. In 1980, the School of Nursing achieved the status of all other schools on the Coral Gables campus and the dean of the school began reporting directly to the provost and executive vice president. The MSN program was accredited in 1982 by the National League for Nursing. In 1984 the PhD program in nursing was approved by the Board of Trustees and funded by the Division of Nursing in the Department of Health and Human Services with a one million dollar grant for five years to help develop the doctoral program. It was one of only 25 doctoral programs in nursing at the time of its initiation. The first doctoral students were admitted in 1985, and the first graduate completed her doctorate in December 1987.

The School celebrated its 60th anniversary in 2008. The M. Christine Schwartz Center for Nursing Education had its ground breaking in October, 2004. In 2005, the School of Nursing became the School of Nursing and Health Studies to reflect the additional responsibilities assumed for the interdisciplinary Health Sciences Program.

Mission Statement

The Mission of the School of Nursing and Health Studies is to educate students and support faculty committed to excellence in the art and science of nursing and health care studies through creating and disseminating health knowledge and developing culturally competent leaders to provide safe service to our community, the nation, and the world (Adopted by the SONHS, 2005).

Accreditation

The Baccalaureate Program is approved by the Florida State Board of Nursing. The Baccalaureate, DNP Programs and Master's Programs are accredited by the Commission on Collegiate Nursing Education (CCNE), One Dupont Circle, NW, Washington, DC, 20036, (202) 887-6791. The Nurse-Midwifery specialty is accredited by the American College of Nurse-Midwives, Suite 1000, 1522 K Street, NW, Washington, DC, 20910-6374, (202) 289-0171 and the Nurse Anesthesia Specialty is accredited by the Council on Accreditation of Nurse Anesthesia Education (COA), 222 South Prospect Avenue, Park Ridge, Illinois, 60068-4001, (847) 692-7050 (ext. 1154).

Technical Standards

Nursing education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills and professional attitudes and behaviors. The nursing degrees awarded by the University of Miami School of Nursing and Health Studies at the completion of the educational process certifies that the individual has acquired a base of knowledge and skills requisite for the practice of nursing at the respective undergraduate or graduate level. To this end, all courses in the curriculum must be completed successfully. In order to acquire the knowledge and skills to function in a variety of clinical situations and to render a wide spectrum of patient care, students in the undergraduate and graduate degrees in nursing, must have abilities and skills in five areas:

- Observation
- Communication
- Motor
- Conceptual-Integrative
- Behavioral-Social

Technological compensation can be made for some disabilities in certain of these areas, but a student should be able to perform in a reasonably independent manner. The use of a trained intermediary means that a candidate's judgment must be mediated by someone else's power of selection and observation, and as such is unacceptable.

Observation

The student must be able to observe demonstrations and participate in didactic courses and simulated learning opportunities. A student must be able to observe a patient accurately at a distance and close at hand. Observation requires the use of common sense, as well as the functional use of the senses of vision, audition, olfaction, and palpation.

Communication

Students must communicate effectively, using English in clinical and classroom settings. A student must be able to elicit information from patients, describe changes in mood, activity and posture, and perceive nonverbal communications. A student must be able to communicate effectively and sensitively with patients. Communication includes not only speech, but reading and writing. The student must be able to communicate effectively and efficiently with all members of the health care team in both immediate and recorded modes.

Motor

Students should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other assessment techniques. A student should be able to perform nursing skills (e.g. IV insertion, venous blood draw, urinary catheter insertion). A student should be able to execute motor movements reasonably required to provide nursing care and emergency response to patients. Examples of emergency responses reasonably required of nurses are cardiopulmonary resuscitation, medication administration, and application of pressure to stop bleeding. Students must perform actions which require the use of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision.

Conceptual-Integrative

These abilities include measurement, calculation, reasoning, analysis, synthesis, and retention of complex information. Critical thinking requires all of these intellectual abilities in order to provide optimal nursing care. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

Behavioral-Social

Students must possess the emotional health required for the full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the care of patients, and the development of mature, sensitive and effective relationships with patients. Students must be able to tolerate physically taxing workloads and to function effectively under stress, both didactically and clinically. They must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical environment. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that are assessed during the admissions and educational process.

MSN Program Outcomes

The MSN program is designed to prepare graduates for a role as a clinical nurse educator or an advanced practice nursing role in primary care, acute care, nurse midwifery or nurse anesthesia. The MSN curriculum incorporates core graduate nursing content and specialized content specific to the track and specialty within each track.

The expected MSN program outcomes are interrelated, derived from the program purposes and delineating those purposes in greater detail. The terminal objectives of the MSN Program are to prepare students who will:

1. Synthesize knowledge from sciences, humanities, and nursing as a basis for culturally competent and safe advanced practice nursing.
2. Integrate specialized knowledge and skills in a selected area of advanced practice nursing.
3. Incorporate professional ethics and social justice in the development of the advanced practice role.
4. Utilize research for the improvement of nursing practice and the advancement of nursing as an academic discipline.
5. Provide leadership for the improvement of health care systems.
6. Promote peer and interdisciplinary collaboration for the continued growth of the advanced practice nursing.

Advisement and Registration

The lead faculty, program directors, and coordinators of the individual specialty tracks in the Master of Science in Nursing Program also serve as advisors to graduate students. Programs of

Study are found in Appendix A. These advisors can address issues related to degree and course requirements.

For various reasons such as financial cancellation, failure to submit a local address, non-compliance with the Office of Student Health Services, a student may be unable to register because a “STOP” has been placed on the student’s record. The Graduate Advisor in the Office of Student Services will assist the student in determining the cause of the stop, however, the student needs to exercise initiative in clearing the stop by contacting the appropriate UM office. A list of phone numbers of the various offices at UM is in the back of this handbook.

Late registration fees go into effect on the second day of the semester. Dropping courses on the second day and thereafter results in a tuition refund or owing tuition which is prorated according to the *University of Miami Bulletin* (www.miami.edu/bulletin). Students should familiarize themselves with the *Bulletin* in order to be aware of the University’s policies and procedures. Lock-step programs may not be subject to prorated refunds (See Lock-step Program Policy).

Change of Specialty Policy

MSN students may apply to change the specialty under which they are admitted according to the following process:

- 1) The student must have a UM MSN GPA of >3.0
- 2) The student cannot be on academic or clinical probation
- 3) The Lead Faculty of both the specialty that the student is in and the specialty to which the student requests must agree to allow the change
- 4) The Change of Specialty Form is completed, signed by the Associate Dean for MSN Programs, and filed with Student Services.
- 5) A copy placed in the student’s record.

GRADING POLICY

The grading scale of the School of Nursing and Health Studies is consistent with the University of Miami grading standards as set forth in the *University of Miami Bulletin* (www.miami.edu/bulletin). The SONHS grading scale is as follows:

Numeric Grade	Letter Grade	Quality Points	
98-100	A+	4.00	
93-97	A	4.00	
90-92	A-	3.70	
87-89	B+	3.30	
83-86	B	3.00	
80-82	B-	2.70	Below Graduate
78-79	C+	2.30	Standards
75-77	C	2.00	
73-74	C-	1.70	
71-72	D+	1.30	

68-70	D	1.00	
▼ -67	F	0.00	
I-Incomplete			
IP-In Progress		0.00	
NG			
W			

PROGRESSIONS POLICY

In order for graduate students to progress through their programs to completion, the academic policy is as follows:

1. Any graduate student who receives a “C” or lower in a nursing course will be dismissed from his or her program.
2. A grade of “B-” or “C+” for a course is below graduate standards, and the student must repeat that course. However, a student may only repeat one course, one time.
3. A passing grade in all clinical experiences is required to pass a course having a clinical component (generally listed as a “lab section” by UM). Students who are not making satisfactory progress may receive an academic alert at mid-semester, mid-course, or at anytime.
4. All grades are included in the computation of the UM overall grade point average including those that are failed or repeated.

PROFESSIONAL BEHAVIOR:

Nursing is a profession which has earned the public’s trust. The importance of student integrity, trustworthiness and honesty are serious concerns, in part due to the implications for patients’ safety. Master’s students are professional registered nurses preparing to assume advanced practice roles. Students are expected to exhibit professional behavior in all interactions with UMSONHS faculty members, staff, fellow students, and patients. Violations of the ANA code, SONHS Professional Behavior Standards, or University of Miami Students Rights and Responsibilities Handbook (<http://www6.miami.edu/dean-students/srr.pdf>) are grounds for probation or dismissal (see Probations Policy, below).

Excerpts from the ANA Code for Nurses defining professional behavior:

- The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
- The nurse’s primary commitment is to the patient, whether an individual, family, group, or community.
- The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.

- The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
- The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal professional growth.
- The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
- The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
- The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.
- The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

SONHS Standards for Professional Behavior:

The SONHS has high expectations and standards for its graduate students. In addition to the Universities policies, the SONHS has adopted these guidelines for professional behavior.

1. Respect for others. Examples include:
 - Arriving to class on time
 - No cell phone use in class or in clinical experiences
 - Being accountable for preparation for class and clinical experiences.
 - Exhibiting care for others in an empathetic manner
 - Participating in honest, open, and assertive (not aggressive) communication.
 - Maintaining the confidentiality of all patient information
 - Respect for the experience of faculty members and preceptors
 - Respect for fellow students
2. Exhibiting professional appearance and image at all times. Examples Include:

- No Jeans at clinical experiences
 - No open toed shoes at clinical experiences
 - Professional White lab coat required at clinical experiences
 - Skirts must be knee length
 - No spaghetti straps or revealing tops
3. Manifesting constructive verbal and non verbal behavior (hostile or confrontation attitudes are not commensurate with professional behavior).
 4. Demonstrate safe, ethical nursing practice in all clinical experiences.

LOCK-STEP PROGRAMS POLICY

MSN programs are lock-step and students must successfully complete a semester to progress to the next semester.

COURSE AND CLASSROOM REQUIREMENTS

Transfer Policy for MSN Students

(approved by Student Council August 17, 2011)

- 1) Transfers to the UMSONHS MSN program from other College/University MSN programs may be permitted.
- 2) With approval from GASAC, no more than 9 credits will be accepted for transfer. The courses that can be presented for consideration for transfer credit to replace the following UMSONHS MSN courses are limited to: 1) NUR 601: Advanced Pharmacology; 2) NUR 612: Physiology/Pathophysiology for Advanced Practice Nursing; and 3) NUR 613: Advanced Health Assessment & Diagnostic Reasoning.
- 3) In order to have the transfer credit accepted in lieu of the student taking NUR 601, 612, or 613, the student must present the syllabi for the courses they wish to transfer. The syllabi will be evaluated for equivalency by the faculty of record for specific course.
- 4) If the course(s) are deemed equivalent, the student must take the UMSONHS MSN Boot Camp in the summer and test out of the course by achieving a minimum of 83% on an exam in that topic. If they are applying to transfer a course in lieu of taking NUR 613, they will take a didactic exam and demonstrate a skill competency in advanced health assessment. Faculty teaching the courses will administer the exam and the skill competency.
- 5) Transfer students may begin coursework on a part time basis and take course that do not require NUR 601, 612, and 613 as pre-requisites.

Syllabi

In each course, a course syllabus is distributed and the content reviewed. The syllabus stipulates course policies, grading standards, and academic expectations of the course. The syllabi contain class objectives, assignments, and required readings. Students are expected to be self-directed in completing the required readings and coming to class prepared to participate in the class learning

experiences. Many courses incorporate student presentations into the teaching-learning process, and students are expected to assume duplication costs when necessary. Copy machines are available in the Richter Library and in the SONHS Lobby in the Student Lounge. Students are encouraged to keep copies of their syllabus forever.

Textbooks

Required and recommended textbooks for each course are listed in the syllabus. Some nursing textbooks are used for more than one designated course and/or serve as reference resources throughout the nursing program.

Attendance

Regular and punctual attendance at classes and clinical learning experiences is expected of all students. Each professor will announce during the first meeting the penalties for non-attendance, missed quizzes and examinations. It is the student's responsibility to know the professor's policies regarding penalties for absences, missed examinations and late or missed work.

Lecture and clinical attendance is a very important aspect of meeting the objectives of the nursing courses. In nursing courses with clinical experiences, more than one clinical absence during the semester is considered excessive. If two days of clinical are missed, it is grounds for dismissal from the course. Any time missed from the clinical experience is made up at the discretion of the faculty in consultation with the student. Students are required to notify the appropriate faculty member when they are going to be late to or absent from the clinical experience using the notification procedure outlined in class by the professor. Additionally, the School of Nursing and Health Studies maintains a 24-hour recording device for messages: (305) 284-3666.

Reference Manual for Writing Papers

All written work for courses in the School of Nursing and Health Studies must be submitted following the guidelines in the latest edition of the *Publication Manual of the American Psychological Association Manual*, 6th Edition. Washington DC: American Psychological Association (2009).

LEAVES OF ABSENCE AND READMISSION

Graduate students must formally request a Leave of Absence (LOA) if their enrollment lapses by one semester (spring or fall) or more. The application must be reviewed by the Graduate Academic Standing and Admissions committee and a recommendation made to the Associate Dean of Master's Programs at the School of Nursing and Health Studies. A student with an LOA who desires to again enroll in courses, must complete a Readmission Application. Readmission is contingent upon review by the Graduate Academic Standing and Admissions Committee which will make a recommendation to the Associate Dean for Master's Programs.

ACADEMIC HONESTY POLICIES

Ethics

Nursing students have special concerns with ethics because of the unique participation in the lives of others that the profession of nursing entails. The School of Nursing and Health Studies follow

the American Nurse's Association's (ANA) Code of Ethics. Questions concerning the ethics of particular situations should always be handled in consultation with a faculty member.

Honor Code

The School of Nursing and Health Studies supports the Graduate Honor Code found at <http://www.miami.edu/pdf/graduatehonorcode.pdf>. In addition to the policies set forth in the Honor Code, the School's faculty has adopted the following policy on plagiarism:

Plagiarism

The School of Nursing and Health Studies as does the University of Miami, have strict penalties against plagiarism. If a student is suspected of plagiarism, the matter will be reported to administration and will ultimately be referred to the Honor Council of the university.

The following paragraphs explain what constitutes plagiarism:

Plagiarism can be defined essentially as the deliberate act of taking the writings and/or ideas of someone else and representing them as your own. All materials provided for students including computer files and print materials are the intellectual property of the instructor and may not be shared with any individual outside the program or course without the written consent of the instructor. This directive remains in effect after graduation and applies to distribution or use of any and all course materials. When downloading files to computers in public labs, the student is responsible for deletion of all files of course materials transferred to computer drives and desktop after use. Plagiarism commonly takes three forms.

The most blatant form of plagiarism is the *direct lifting* of a passage from another book (encyclopedia, reference book, literacy criticism, and/or other printed sources) and including it in your paper as if it were your own work without using any quotation marks and/or without providing a proper citation. In addition, another direct and blatant form of plagiarism is that of obtaining information from electronic sources and submitting it as your own work.

A second form of plagiarism *involves paraphrasing*. Essentially, when you paraphrase, you take a passage from another book and change some of the words, altering the phrasing but not the meaning. Although some of the writing is now your own, paraphrasing differs only in degree from direct lifting a passage. Anytime you paraphrase material which is not your own, you should indicate it with a reference in which you identify the source used.

A third kind of plagiarism *involves taking the major ideas from another book and incorporating them into your paper as if they were the products of your own thinking*. Even though you may not have taken any lines directly from the source material, it is still considered plagiarism to use another's ideas while representing them as your own.

Sanctions for Plagiarism

Plagiarism is considered a serious offense in academic settings. In general, when plagiarism is discovered by a faculty member any one or more of the following responses are considered appropriate:

1. Failure on the assignment
2. Failure in the course
3. Referral to the Honor Council
4. Dismissal from the School/University and forfeiture of the degree

If plagiarism is discovered after a course or program has been completed, the following responses may be recommended:

1. Failure of the course, retroactively
2. Failure of the program, retroactively
3. Withdrawal of degree, retroactively

Distance Learning User Verification Policy

It is critical that students in the University of Miami School of Nursing and Health Studies who are enrolled in distance education courses adhere to university and school policies related to academic integrity. It is vital that students who enroll in distance education courses and programs are the same students who complete work and assignments in those programs or courses. Violation of this policy will be considered a serious breach, and will be dealt with according to University and School policies for violation of the academic integrity policies including academic dishonesty, cheating, and plagiarism.

Verification of students in distance education programs and courses will be initially conducted using IDs and passwords. As more sophisticated approaches for verifying the identity of students become available, these approaches will be considered and incorporated into regular program and course procedures. For example, approaches to be considered in the future by the *School of Nursing and Health Studies Academic Technology and Distance Education Task Force* might be:

- Web video recordings
- Challenge Questions
- Face-to-face proctored assignments and exams
- Video proctoring

PROBATION POLICY:

Probation is defined as a time-limited opportunity to help a student identify and correct academic and/or behavior deficiencies. Probation is a vehicle to encourage a student to seek individual or more intensive instruction.

Grounds for Probation

Reasons for placing a student on probation include:

- Failing to meet clinical performance objectives.
- Repeated difficulty relating/recalling didactic information in clinical experiences.
- Preceptor or clinical site coordinator requests the removal of a student from a clinical site
- Preceptor or faculty has concerns regarding clinical judgment or competency
- Student is involved in critical clinical incident
- Repeated errors in clinical judgment
- Inability to select appropriate action in response to a critical clinical event
- Repeated inadequate/unsafe technique or clinical skills
- Acting in a way as to be a threat to patient safety.
- Persistent tardiness or lateness in the clinical area.
- Unexplained absence from clinical.
- Leaving clinical area without notifying supervising staff.
- An act of insubordination is defined as failure or refusal to follow a directive of a faculty member, preceptor, or other persons of authority.
- Violations of SONHS Standards for Professional Behavior (listed on pg.7)
- Falsification of documents including, but not limited to, Typhon System, medical records, controlled substances documentation, clinical evaluation forms.
- Failure to prepare for or participate in course related assignments e.g., : journal club, seminar, clinical anesthesia conference, professional conferences, self-evaluations, care plans, accurate case record tracking and Typhon record keeping, clinical, didactic, faculty evaluations or other materials assigned by faculty.

Terms of Probation:

1. While on probation, the student meets weekly with program faculty to review progress towards correcting deficiencies. The student is responsible for scheduling these meetings.
2. While on probation the student must attend the clinical sites determined by the course coordinator chosen for quality of clinical instruction and/or clinical case availability.
3. Nurse Anesthesia students may not take elective time off while on probation.
4. The initial probation period will be no less than 30 days. At the end of the 30 day period the student's progress will be evaluated. If the deficiencies in the probation form have been met, then probation will be terminated.
5. If the student has not met the probationary terms, but is making significant progress as determined by the faculty, the probationary status may be extended for up to an additional thirty-day period. During either the initial or additional probationary period, any serious violation of professional behavior standards or occurrence of behaviors that are listed as grounds for probation can result in recommendation for immediate dismissal of the student from the Program or from the SONHS.
6. If the student fails to make significant progress at the end of 30 days, or correct the identified deficiencies or meet requirements of by the end of the second probationary period, the Course Coordinator and Program Director/Lead Faculty in conjunction with the Associate Dean informs the student of the decision to dismiss the student. The student has access to appeal through the Academic Appeals process.

RESOLVING ACADEMIC DISPUTES AND SOLVING PROBLEMS

A student, who wishes to resolve an issue, dispute, and/or a problem related to his or her role as a student, may make an appointment to meet with the Associate Dean of MSN programs at the School. Examples of these include, but are not limited to grade disputes, the progression policy, completion of incompletes, accusations of honor code violations, charges of unsafe practice or unprofessional behavior, dismissals, overrides for registration, retroactive course drops, completion of terms of an independent study contract, acknowledgement of transfer credits, issues with transcripts, course prerequisites, course waivers or special circumstances regarding changing programs or withdrawing from classes. If attempts to resolve such issues, disputes, and problems are unsuccessful after intervention by the Associate Dean, the student has the right to avail him or herself of the academic appeals process. Further, the Associate Dean will advise the Dean of the School of his or her findings as appropriate and make recommendations to the Dean of any actions that should be taken. (Graduate Student Academic Appeals Policy, pg.13)

DISMISSAL POLICY

The following circumstances are grounds for dismissal from the student's specialty program or the SONHS:

- a) Plagiarism
- b) Grade of a C or below in any course
- c) Failure of 2 courses (two grades of B- or below) or any individual course twice
- d) Violation of the ANA's Code of Conduct for Nurses
- e) Found to be impaired by substance use while conducting school-related activities or while attending clinical
- f) Failure to comply with request for Drug & Alcohol Screening
- g) Violation of the terms of probation and/or the failure to emerge from Probationary Status
- h) Violations of professional behavior, poor preparation for course related assignments
- i) Violations of patient safety standards
- j) Violations of expected clinical performance objectives, and acts of insubordination Deemed to be significantly serious
- k) Dismissal from a course for unexcused absence or not financially registered

The decision for dismissal is vested in the Vice Dean of the SONHS.

GRADUATE STUDENT ACADEMIC APPEALS POLICY:

Appeals:

The academic community is unanimous in its position that the grade an instructor assigns to a student is the instructor's responsibility and privilege. Any effort to alter this would be a violation of academic freedom.

It is the instructor's responsibility to establish criteria for assigning grades. Grounds for appeal of how a grade was assigned are: (1) The application of non-academic criteria in the grading process, as listed in the University's non-discrimination and affirmative action statute: race, color, sex, national origin, religions, age, sexual orientation, marital status, or handicap; (2) sexual harassment,

or (3) failure to adhere to the grading criteria established for the course. The student should discuss the dispute with the instructor and make all efforts to resolve the grading issue prior to filing a formal appeal. Failing to resolve the disputed grade, the student should follow the steps listed in the Academic Appeals Process below.

Written Formal Appeal:

If a dispute or problem is not resolved through interactions with the instructor (grades) or through discussions conducted by the Associate Dean of MSN Programs, the student may file a formal written appeal to the Grievances, Appeals, and Policy Subcommittee of the Graduate Faculty Committee. The Subcommittee members reserve the right to decide whether or not it will hear the appeal presented by the student. Written appeals must be filed within 30 days of the occurrence of the academic action resulting in the appeal and prior to the completion of all degree requirements or withdrawal from the University. The Committee may, at its sole discretion, decide to hear appeals filed after the preceding time periods have elapsed.

When bringing a matter before the Committee the student must place in writing issues she/he wishes to have considered. The appeal must include:

- a. The conditions as seen by the student, offering a rationale for appeal, and any other supporting documentation that she/he wishes the Committee to examine.
- b. Whether or not the student wishes to make a personal appearance before the Committee and the reasons why.
- c. Documents of support (e.g., examinations, tests, papers, syllabi, evaluations, provide documentation of illness, or any other documents relevant to the appeal).
- d. All written decisions of individual faculty/administrators.
- e. If the appeal is based on or related to a disability:

The student should provide a copy of the Letter to Professors received from Accessibility Resources (AR) and describe any other information pertinent to the question of disability.

The letter of appeal and supporting documentation which the student would like to be considered by the Committee will be reviewed by the committee within 1 month of receiving the written appeal.

The Committee will review the student's written appeal; confer with the appropriate faculty, administrators, and other appropriate individuals as necessary in making its recommendation to the Dean. In the process of making its recommendation, the Committee may request that:

- a. The student to be interviewed provides additional information or access to records, or appears before the Committee.
- b. The faculty and/or administrator to be interviewed provides additional information or access to records, or appears before the Committee.

The Committee will communicate its findings and recommendations to the Associate Dean of MSN Programs and the Dean of the School. The final decision with respect to the appeals will be made by the Dean SONHS and communicated to the student in writing. Once a decision has been rendered and if the student still believes that her/his case has been handled unfairly, the student has the right to redress all issues to the University appeals process. This process begins with the student contacting the University Ombudsperson office at 305-284-4922 or ombudsperson@miami.edu.

University Ombudsperson

The student and/or faculty may contact the University Ombudsperson at any time for assistance with any problem associated with an academic appeal. The Ombudsperson for the University of Miami may be reached at 305-284-4922 or ombudsperson@miami.edu.

Decisions made outside of the Subcommittee:

Decisions made by the Graduate Honor Council or by Accessibility Resources will not be heard through the SONHS appeal process. The student should appeal through the appeal processes of the Graduate School Honor Council or Accessibility Resources.

GRADUATE SCHOOL GRIEVANCE GUIDELINES

Student Grievance Procedures

Introduction

These University of Miami Graduate Grievance Procedures provides an opportunity for the resolution of disputes involving graduate students in a fair and collegial manner. These Graduate Student Grievance Procedures supersede all prior such procedures in effect or formerly utilized at the graduate level. They do not supplant UM Students Rights & Responsibilities or any other published policy or procedure relating to graduate students.

Purview of the Guidelines

The formal grievance process described herein is intended for cases not involving grades or matters covered by the Honor Code, which have not been resolved at the department or program level, and it is available only after a final determination within the relevant School or College has been reached. Students are encouraged to seek assistance from the University Ombudsperson for possible resolution before initiating the formal graduate grievance process. The procedures set forth here are applicable to any of the following types of grievances by graduate students who are enrolled in any graduate program at the University of Miami, except exclusively in the MD and JD programs:

1. Grievances alleging improper dismissal or suspension from a graduate program.
2. Grievances alleging the improper withholding or termination of financial support of any kind.
3. Grievances alleging any other improper treatment, either substantive or procedural, of a graduate student by a faculty member, department or program, or university agency or

administrator except:

- a. Allegations of improper evaluation of the quality and/or quantity of academic work (see UM Student Rights & Responsibilities);
- b. Allegations of unfair recommendation for employment or further graduate study;
- c. Allegations of discriminatory treatment arising from the student complainant's age, race, gender, sexual preference, handicap, national origin, or religion. (Such allegations ordinarily are handled by the Office of Equality Administration);

Constitution of the Committee and Grievance Panel

The Graduate Council Grievance Committee (GCGC) is a standing committee comprised of the Schools' and Colleges' alternate representatives to the Graduate Council. Grievances as understood herein shall be heard by *ad hoc* appeals panels, constituted from time to time by the Dean of the Graduate School to review individual graduate grievances. The Grievance Review Panel (GRP) shall consist of five disinterested members: four faculty members of the GCGC and one graduate student appointed by the executive board of the Graduate Students' Association. Notice of the constitution of the GRP shall be given by the Office of the Graduate Dean in writing to all parties to the grievance within ten (10) days after the grievance review request is properly filed.

Any party to the grievance may challenge the disinterestedness of a GRP member in writing to the Dean of the Graduate School within five (5) days after notification of the appointment. The challenge must specify reasons that would prevent the committee member or graduate student from making an unbiased recommendation with respect to the grievance. If such a challenge is determined to be valid by the Graduate Dean, a substitute appointment shall be made and the process will resume accordingly.

Procedure and Time Limits for Filing a Grievance

After a final determination has been made in the relevant School or College (or by the head of the relevant administrative office in the event of a grievance against a university agency), a student who believes he or she has grounds for appeal within the purview of these guidelines may file a written grievance review request with the Office of the Dean of the Graduate School. The request shall describe the student's allegations in a clear and concise fashion and shall clearly identify the individual(s), program(s), department, School or College, and/or University agency or administrator against whom the grievance is brought. The student's written grievance review request shall be filed within thirty (30) days of the final determination. No grievance review request or any other appeal of any kind will be granted after this time limit has expired unless a written extension of time is granted by the Dean of the Graduate School based on a written request from the grievant stating good cause.

Definitions and Assumptions

Burden of Persuasion: The burden of persuasion is on the grievant.

Final Determination: This grievance process is available only after a final determination within the relevant School or College has been reached. This provision is intended to require the grievant to exhaust the remedies available within the relevant School or College before appealing

to the Graduate Dean. In the case of a student in an interdisciplinary program who does not yet have a chair and/or committee assembled, the Dean of the Graduate School shall make a final determination in the student's case subject thereafter to the appeal contemplated by this policy. Appeal from the Graduate School Dean's decision follows this same procedure, except that the GRP shall be constituted by the Office of the Provost from the pool of GCGC members.

Written notice of the constitution of the Grievance Review Panel in the case of a student in an interdisciplinary program without a chair or committee, shall be given by the Office of the Provost to all parties to the grievance within ten (10) days after the grievance review request is properly filed. All other deadlines, requirements, procedures and hearing format remain the same.

Originals: Wherever possible, the party in possession of an original document in support of or rebuttal to or at issue in the grievance shall provide it to the GRP within the time frames set out in the Hearing Materials and Preparation Deadlines. If a party has only a copy of a document not received by him, her, or it, the copy shall serve as an original. Digital documents or email messages in contention shall be printed and may then serve as originals.

Party: A party is the student grievant or the individual, program, department, School or College, or University agency or administrator against whom the student brings his or her grievance.

Time Limits: All time limits shall be calculated based on working days of the Fall and Spring Semesters, excluding reading and exam periods and University holidays. Grievances originally filed after the end of the Spring semester will be heard at the beginning of the following Fall Semester. Any stated time limit herein may be extended with the written consent of the grievant and the Dean of the Graduate School.

Written: Any document to which these guidelines refer as written signifies paper (hard) copy. Email messages and digital or other electronic versions do not meet the requirement that a form or notice be provided in writing. However, a party may transmit a digital version of any written document by email in addition to providing it in paper form.

Deadline for Hearing Materials, Preparation and Witness Identification

All materials to be considered for review by the members of the GRP must be submitted in writing to the Office of the Dean of the Graduate School at least fourteen (14) days before the scheduled date of the hearing, at which time such materials will be distributed to all parties to the grievance and to the members of the GRP. Thereafter, to the extent that any of the parties wishes to have additional materials considered by the GRP, such materials must be received by the Graduate School no later than seven (7) days before the scheduled date of the hearing, at which time all such additional written materials will be distributed to the parties as well as to the members of the GRP. Any party submitting written materials for consideration shall submit the original(s) and five (5) copies thereof to the Office of the Graduate Dean at his, her, or its own expense. The name of any witness to be called by any party at the hearing shall be provided in writing to the Office of the Graduate Dean no less than five (5) days before the scheduled date of the hearing.

Hearing

The grievance review hearing is chaired by a designated member of the GRP. The hearing is staffed by the non-voting Administrative Assistant of the Dean of the Graduate School, who will record it for archival purposes only. The hearing will proceed as follows:

- a. GRP chair's introduction, summary of issues and process overview.
- b. Student's presentation of issues (15 minutes maximum)
- c. University representative's presentation of issues (15 minutes maximum)
- d. Optional: Presentation(s) by witnesses (limited to 3 per side and a maximum of 15 minutes total per side).
- e. Questions by members of the GRP.
- f. All presenters and witnesses are excused.
- g. Deliberation by GRP.

Presentation of the issues should be concise and relevant. Undoubtedly the dispute is somewhat complex or it would not have reached this stage. Points of dispute or ambiguity may be summarized or illustrated by anecdote at the hearing. Experience suggests, however, that the best approach is to minimize formal presentations and allow the GRP members maximum time for questions.

GRP Decision and Authority

No additional substantive information may be submitted by any party following the hearing, unless requested by the grievance review panel. The GRP may but need not seek additional information from other sources during its deliberations, which will be conducted in closed session. Following its deliberations, and within ten (10) days of the date of the grievance review hearing, the GRP will make its confidential advisory recommendation to the Dean of the Graduate School (Office of the Provost) in the event of a student in an interdisciplinary program who does not yet have a chair or committee. The subsequent decision by the Dean of the Graduate School (Office of the Provost), which shall be rendered within ten (10) days of the GRP's recommendation, is final.

Modifications

These procedures may be modified or withdrawn with or without notice.

CLINICAL EXPERIENCE GUIDELINES

Requirements Prior to Starting Clinical Courses

Prior to beginning a master's program, all students must meet the requirements for clinical courses as specified by the agencies with whom the School contracts. This is for the safety of students, clients, agency employees, and all those with whom students interact. Verification of compliance must be submitted annually to the Office of Student Services. **Failure to comply with these requirements will result in the student being withdrawn from clinical experiences.**

Florida RN License

All master's students are required to be registered nurses in the State of Florida and maintain a valid registration and clear license throughout their educational experience in the master's

program. RN license verification must be on file in the student's folder located in the Office of Student Services.

Physical Examination

A complete physical examination is required prior to admission and must be signed by the physician on the immunization form provided.

Background Check, FBI Fingerprinting and Drug Testing Clearance

The Joint Commission Accreditation of Healthcare Organization (JCAHO), which accredits healthcare facilities across the country, has set forth requirements mandating that students in a healthcare field must now complete the same background check as hospital employees. American DataBank has been asked to perform background checks for University of Miami nursing students every year. For further information, please visit the SONHS website at <http://www6.miami.edu/sonhs/undergrad/screening.html>.

Cardiopulmonary Resuscitation (CPR) Certification

All students need to be CPR certified. - The certification required is the Basic Life Support for Health Care Providers (adult, child and infant) a Heart Saver course is not acceptable. - Please go to <http://www.americanheart.org> and click on the link on CPR & ECC. - Please fax us or send a copy of the CPR with the immunization form.

Immunizations

Students must submit the immunization forms completed by their physicians located at <http://www6.miami.edu/sonhs/undergrad/screening.html> to both the School of Nursing and Health Studies and to the University of Miami Student Health Services Office. The UM Student Health Services office will accept a fax at 305-284-6463.

- **Tuberculosis - PPD Skin Test**
Required yearly. If positive, a chest x-ray is required within the last 12 months.
- **Hepatitis B Series**
A series of three injections is given over a period of six months. Students may decline the Hepatitis B vaccination series for certain medical reasons; however, a Hepatitis B Virus Vaccination Declination Form must be submitted.
- **Varicella (Chicken Pox)**
Titer required if individual was vaccinated, if not, vaccination is required.
- **Measles, Mumps and Rubella**
Documentation of vaccination on or after first birthday or laboratory evidence of immunity by antibody titer.
- **Tetanus/Diphtheria**
Booster required every 10 years.

Some of these immunizations are available at low cost through the Student Health Service, (305) 284-5927, 5513 Merrick Drive who can also test for and verify existing immunity.

Drug Screening

A 10 panel drug screen through American Data Bank is required at the time of admission, prior to starting classes. A positive drug screen report from American Data Bank may result in the student's admission being withdrawn and notification of the positive result to the Board of Nursing, according to the reporting requirements for registered professional nurses (464.018, Disciplinary actions, Florida Nurse Practice Act).

Clinical Agency Requirements

Our clinical agencies' contracts require that students practicing in the clinical setting comply with Federal OSHA and JCAHO regulations. Students may not participate in clinical activities until they provide evidence of compliance. Absence from clinical laboratory experiences due to a student's lack of compliance with this requirement will be considered as an unexcused absence, and may not be made up.

Clinical Attire

Approved nursing attire must be worn during all clinical experiences. The student represents not only himself/herself, but the School of Nursing and Health Studies and the University of Miami, as well as the nursing profession. The student is expected to present a clean, well-groomed appearance. For purposes of infection control, hair must be worn off the collar. Uniforms should be purchased with comfort and professional appearance in mind. A University of Miami name pin must be worn on the uniform and the lab coat at all times.

Accessories

A watch with a second hand is required. A stethoscope is required. A blood pressure cuff is strongly recommended. Jewelry should be chosen with cleanliness, safety, and professionalism in mind. A watch is the only arm jewelry allowed; rings should be limited to one per hand; earrings, if worn, are to be small; neck chains, if worn, must be covered by the uniform. Nose or tongue rings are unacceptable.

Latex Allergy Policy

With the increased use of gloves made from natural rubber latex, allergy to natural rubber latex has become more common and better recognized. During clinical experiences throughout the BSN program exposure to natural rubber latex will be frequent and commonplace. Exposure to latex direct contact as well as indirect contact, such as occurs when an allergic person is in the same room where other staff are putting on and off powdered latex gloves and airborne particles, produce a hazardous exposure. **Any student who has a latex allergy will need to take specific precautions to prevent any allergic reaction that could result from the exposure to the natural rubber latex.**

1. If a student has a known allergy to natural rubber latex, then the student must obtain a signed

physician's statement of the diagnosis of the allergy and any recommendations concerning that allergy. The physician's statement must be submitted to the Office of Student Services and will be placed in the student's file.

2. Students are responsible to notify their clinical instructors of their latex allergy and determine the methods that will be necessary for them to avoid exposure to latex. Such methods may include notifying staff on the units where the student is assigned of the student's allergy to latex.
3. Students are responsible to provide and carry with them non-latex gloves for their use in the clinical settings. Students may also need to provide non-latex gloves to staff who are working in the same room with the student.

Medical Center Identification

A University of Miami identification card (with photograph) is required in order to use Calder Medical Library. This identification must be worn by students whenever they are on the Medical campus. Calder Library is located on the medical campus at 1601 NW Tenth Avenue and contains many health related sources that are not available at Richter. Students must present their University of Miami ID cards when checking out materials.

Transportation to Clinical Sites

Students are responsible for arranging their own transportation between the Coral Gables campus, the Medical campus and various clinical facilities. Car pools are encouraged when possible. Metrorail passes may be purchased on the Coral Gables campus. Each student is encouraged to plan accordingly for transportation in order to avoid being late for classes and/or clinical experiences.

Health Insurance Portability and Accountability Act (HIPAA)

HIPAA information and policies are located at the University of Miami's Office of HIPAA Privacy and Security website at <http://www.med.miami.edu/hipaa/public>.

Impaired Student Policy

For the safety of our students, patients, clients, and community, graduate nursing students are subject to random drug testing. Declining to provide a Drug Test can be grounds for dismissal.

The following information is presented in response to compliance of regulations of the Drug-Free Schools and Communities Act amendment of 1989 (Public Law 101-226), Section 22: "Drug-Free Schools and Campuses." Regulation: Sec. 1213 "Drug and Alcohol Abuse Prevention"

Section 1213 Subpart B.a.1. requires annual distribution to each student and employee of: "standards of conduct that clearly prohibit, at a minimum, the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on its property or as part of any of its activities."

All students, faculty, administrators, and support staff are expected to recognize the potential for alcohol and drug abuse whenever illegal drugs or alcohol are sold, given, manufactured, and/or used and that such abuse is in conflict with the University's purpose. To mitigate abuse, the

University has established policies and regulations which adhere to applicable federal laws and Florida statutes regarding such abuse. The regulations and policies governing the use of alcoholic beverages apply to all students, guests, and visitors on University property or as part of any University activity. The responsibility for knowing and abiding by the provisions of the University's beverage and drug policies rests with each individual.

Section 1213 Subpart B.a.2. requires: "a description of the applicable legal sanctions under local, state, or federal law for the unlawful possession or distribution of illicit drugs and alcohol."

The Florida State Statutes on drug and alcohol abuse are based upon and are consistent with current Federal Statutes, which are found in Titles 21 and 27 of the United States Code.

The University of Miami adheres to Florida Statutes, Chapter 562, which detail the Florida Laws on alcoholic beverages and related penalties (misdemeanor, felony). These statutes include selling, giving or serving alcoholic beverages to persons under 21 years of age (562.11) and for possession of alcoholic beverages by persons under 21 years of age (562.111). It is unlawful for any person to misrepresent or misstate his or her age. This includes the manufacture or use of false identification. Use of altered identification for the purpose of procuring alcoholic beverages is a felony. It is unlawful for any person to consume or possess open containers of alcoholic beverages while in municipal parks, playgrounds, sidewalks or streets. It is unlawful for a person to be found in the state of intoxication on a street or public place while within the city limits. It is unlawful for a person to drive while under the influence of alcohol or other drugs. *Penalties* include: (a) a mandatory suspension of license for 90 days for the first conviction; (b) fines of up to \$500.00 for the first offense; (c) a minimum of 50 hours community service; (d) imprisonment of not more than six months.

The Florida Statutes, to which the University of Miami adheres with regard to drug abuse, are found in Florida Statutes, chapter 893. This chapter includes definitions of what constitutes illegal drugs, drug paraphernalia, prohibited activities, and related penalties. Conviction for the possession or distribution of illegal drugs or alcohol will result in various penalties according to the nature of the offense. This can include imprisonment, fines, confiscation of property, and other related penalties. A violation of State Law, which results in a conviction, will result in additional disciplinary action by the University.

According to Section 893.13 (1) Florida Statutes, it is unlawful for any person to sell, purchase, manufacture, or deliver, or to possess with the intent to sell, purchase, manufacture, or deliver, a controlled substance in, on, or within 200 feet of the real property comprising a public or private college, university, or other postsecondary educational institution." Individuals who violate this law commit a felony of the first degree, and shall be sentenced to a minimum term of "imprisonment for three calendar years and shall not be eligible for parole or release under the Control Release Authority pursuant to s.947.146 or statutory gain-time under s.994.275 prior to serving such minimum sentence."

Section 1213 Subpart B. a.3. requires "a description of the health risks associated with the use of illicit drugs and the abuse of alcohol."

The following health risks are related to alcohol and drug abuse:

Alcohol

Alcohol is a “psychoactive” or mind-altering drug. It can alter moods, cause changes in the body, and become habit forming. Alcohol is called a “downer” because it depresses the central nervous system. Drinking too much causes slowed reactions, slurred speech, and sometimes unconsciousness. Alcohol works first on the part of the brain that controls inhibitions. A person does not have to be an alcoholic to have problems with alcohol. Every year, many individuals lose their lives in alcohol-related automobile accidents, drowning, and suicides. Serious health problems can and do occur before drinkers reach the stage of addiction or chronic use.

Some of the serious diseases associated with chronic alcohol use include alcoholism and cancer of the liver, stomach, colon, larynx, esophagus, and breast. Alcohol abuse also can lead to such serious physical problems as: damage to the brain, pancreas, and kidneys; high blood pressure, heart attacks, and strokes; alcoholic hepatitis and cirrhosis of the liver; stomach and duodenal ulcers, colitis, and irritable colon; impotence and infertility; birth defects and Fetal Alcohol Syndrome, which causes retardation, low birth weight, small head size, and limb abnormalities; premature aging; and a host of other disorders such as diminished immunity to disease, sleep disturbances, muscle cramps, and edema.

Marijuana

The potency of the marijuana now available has increased more than 275% since 1980. For those who currently smoke marijuana, the dangers are much more serious than they were in the 1960’s. There are more known cancer-causing agents in marijuana smoke than in cigarette smoke. In fact, because marijuana smokers try to hold the smoke in their lungs as long as possible, one marijuana cigarette can be as damaging to the lungs as four tobacco cigarettes.

Even small doses of marijuana can impair memory function, distort perception, hamper judgment, and diminish motor skills. Chronic marijuana use can cause brain damage and changes in the brain similar to those that occur during aging. Health effects also include accelerated heartbeat and, in some persons, increased blood pressure. These changes pose health risks for anyone, but particularly for people with abnormal heart and circulatory conditions, such as high blood pressure and hardening of the arteries.

Marijuana can also have a serious effect on reproduction. Some studies have shown that women who smoke marijuana during pregnancy may give birth to babies with defects similar to those seen in infants born with Fetal Alcohol Syndrome – for example, low body weight and small head size.

Cocaine

Cocaine is one of the most powerfully addictive of the drugs of abuse, and it is a drug that can lead to death. No individual can predict whether or not he or she will become addicted or whether the next dose of cocaine will prove to be fatal. Cocaine can be snorted through the nose, smoked, or injected. Injecting cocaine, or injecting any drug, carries the added risk of contracting HIV, the virus that causes AIDS if the user shares a hypodermic needle with a person already infected with HIV. Cocaine is a very strong stimulant to the central nervous system, including the brain.

This drug produces an accelerated heart rate while at the same time constricting the blood vessels which are trying to handle the additional flow of blood. Pupils dilate and temperature and blood pressure rises. These physical changes may be accompanied by seizures, cardiac arrest, respiratory arrest, or stroke. Nasal problems, including congestion and a runny nose occur with the use of cocaine, and with prolonged use the mucous membrane of the nose may disintegrate. Heavy use of cocaine can sufficiently damage the nasal septum to cause it to collapse. Users often report being depressed when they are not using the drug and often resume use to alleviate further depression. In addition, cocaine users frequently find that they need more and more cocaine more often to generate the same level of stimulation. Therefore, any use can lead to addiction. “Freebase” is a form of cocaine that is smoked. Freebase is produced by a chemical process whereby “street cocaine” (cocaine hydrochloride) is converted to a pure base by removing the hydrochloride salt and some of the “cutting” agents. The end product is not water soluble, so the only way to get it into the system is to smoke it. The cocaine reaches the brain within seconds, resulting in a sudden and intense high. However, the euphoria quickly disappears, leaving the user with an enormous craving to freebase again and again. The user usually increases the dose and the frequency to satisfy this craving, which results in addiction and physical debilitation.

“Crack” is the street name given to one form of freebase cocaine that comes in the form of small lumps or shavings. The term, “crack” refers to the crackling sound made when the mixture is smoked (heated).

Heroin

Heroin is an illegal opiate drug. The addictive properties of Heroin are manifested by the need for persistent, repeated use of the drug (craving) and by the fact that attempts to stop using the drug leads to significant and painful physical withdrawal symptoms. Use of heroin causes physical and psychological problems such as shallow breathing, nausea, panic, insomnia, and a need for increasingly higher doses of the drug to get the same effect. Heroin exerts its primary addictive effect by activating many regions of the brain; the brain regions affected are responsible for producing both the pleasurable sensation of “reward” and physical dependence. Together, these actions account for the user’s loss of control and the drug’s habit-forming action.

Heroin is a drug that is primarily taken by injection (a shot) with a needle in the vein. This form of use is called intravenous injection (commonly known as IV injection). This means of drug entry can have grave consequences. Uncertain dosage levels (due to differences in purity), the use of unsterile equipment, contamination of heroin with cutting agents, or the use of heroin in combination with such other drugs as alcohol or cocaine can cause serious health problems such as serum hepatitis, skin abscesses, inflammation of veins, and cardiac disease (subacute bacterial endocarditis). Of great importance, however, the user never knows whether the next dose will be unusually potent, leading to overdose, coma, and possible death. Heroin is responsible for many deaths. Needle sharing by IV drug users is one of the causes of new AIDS cases.

The signs and symptoms of heroin use include euphoria, drowsiness, respiratory depression (which can progress until breathing stops), constricted pupils, and nausea. Withdrawal symptoms include watery eyes, runny nose, yawning, loss of appetite, tremors, panic, chills, sweating, nausea, muscle cramps, and insomnia. Elevations in blood pressure, pulse, respiratory rate, and

temperature occur as withdrawal progresses. Symptoms of a heroin overdose include shallow breathing, pinpoint pupils, clammy skin, convulsions, and coma.

PCP

PCP is a hallucinogenic drug; that is, a drug that alters sensation, mood, and consciousness and that may distort hearing, touch, smell, or taste as well as visual sensation, it is legitimately used as an anesthetic for animals. When used by humans, PCP induces a profound departure from reality, which leaves the user capable of bizarre behavior and severe disorientation. These PCP-induced effects may lead to serious injuries or death to the user while under the influence of the drug.

PCP produces feelings of mental depression in some individuals. When PCP is used regularly, memory, perception functions, concentration, and judgment are often disturbed. Used chronically, PCP may lead to permanent changes in cognitive ability (thinking), memory, and fine motor function.

“Designer Drugs”

By modifying the chemical structure of certain drugs, underground chemists are now able to create what are called “designer drugs” – a label that incorrectly glamorizes them. They are, in fact, analogues of illegal substances. Frequently, these drugs can be much more potent than the original substances; therefore, they can produce much more toxic effects. “Ecstasy” for example, is a drug in the amphetamine family that, according to some users, produces an initial state of disorientation followed by a rush and then a mellow, sociable feeling. We now know however, that it also kills certain kinds of brain cells.

Section 1213 Subpart a.4 requires “ a description of any drug or alcohol counseling, treatment, or rehabilitation, or re-entry programs that are available to employees or students.”

A list of some drug and alcohol prevention, counseling, treatment and rehabilitation, and re-entry programs are available at the Center for Alcohol and Other Drug Education located in Building 21-E. Additional programs may be listed in the local and other area telephone *directories*.

Section 1213 Subpart B.a.5 requires “ a clear statement that the institution will impose sanctions on students and employees (consistent with local, State and Federal law), and a description of those sanctions, up to and including expulsion or termination of employment and referral for prosecution for violations of the standards of conduct required by Section 1213 Subpart B.a.1.”

The University will impose sanctions for violation of the standards of conduct consistent with local, state, and federal laws, student and employee handbooks, and University policies. Violations will result in disciplinary action, up to and including termination of employment, expulsion, and referral for prosecution. Sanctions imposed will depend upon the severity and frequency of the violation. In addition to, or in lieu of discipline, violators may be required to complete an appropriate rehabilitation program.

Students enrolled in the School must observe the aforementioned policies. A student may be required to undergo drug or alcohol screening if he/she is suspected to be impaired from drugs or alcohol, at the discretion of a faculty, clinical preceptor, clinical instructor, or school

administrators. **If a student refuses to comply with the request from a faculty, clinical preceptor, clinical instructor, or school administrator to undergo drug or alcohol screening, the student may be dismissed from the University of Miami School of Nursing and Health Studies.**

Specific Circumstances Requiring Immediate Action from Preceptors:

Policy for Safe Practice in Clinical Settings

As registered nurses, students are expected to practice safely and ethically adhering to the American Nurses Association Code for Nurses, Standards of Practice, and the State of Florida Nurse Practice Act which is located online at

<http://www.doh.state.fl.us/mqa/nursing/infoPracticeAct.pdf>.

Exposure Control Policy & Procedures

Precautions to Prevent Transmission of HIV – CDC Universal Precautions

Since medical history and examination cannot reliably identify all patients infected with HIV or other blood-borne pathogens, blood and body fluid precautions should be consistently used for all patients. This approach, previously recommended by the Center for Disease Control (CDC), and referred to as "universal blood and body-fluid precautions" or "universal precautions" should be used in the care of all patients, especially including those in emergency-care settings in which the risk of blood exposure is increased and the infection status of patient is usually unknown. Detailed information on the CDC's Universal Precautions is found at

<http://www.cdc.gov/ncidod/dhqp/wrkroccHealth.html>

Exposure Control Policy

The University of Miami's School of Nursing and Health Studies is committed to providing a safe and healthy environment for our students. All students at the School of Nursing and Health Studies having exposure to blood or other potentially infectious materials in a clinical capacity are covered under this policy. Students who are determined to have exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this Exposure Control Policy (ECP).

Exposure Control Plan

Students covered by this policy will receive an explanation of this ECP during their initial training session. It will also be reviewed before each clinical rotation.

Universal Precautions

All students will utilize universal precautions as indicated above.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to blood borne pathogens. The specific engineering controls and work practice controls used such as use of

"Sharps with Engineered Sharps Injury Protections (SESIPs)." These are defined as "a non needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident." This term encompasses a broad array of devices that make injury involving a contaminated sharp less likely.

They include, but are not limited to:

- Syringes with guards or sliding sheaths that shield the attached needle after use.
- Needles that retract into a syringe after use; shielded or retracting catheters used to access the bloodstream for intravenous administration of medication or fluids.
- Intravenous medication delivery systems that administer medication or fluids through a catheter port or connector site using a needle that is housed in a protective covering, blunt suture needles.
- Plastic (instead of glass) capillary tubes.
- *Sharps disposal containers* are inspected and maintained or replaced by the Health Care Agency to prevent overfilling. Students should not attempt to dispose of sharps in an overfilled container.
- Students will be instructed in the proper use of safety devices prior to their use.

Personal Protective Equipment (PPE)

PPE is provided to our students at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by the clinical faculty member or preceptor. The types of PPE available to students are as follows:

- Gowns
- Gloves
- Masks
- Aprons
- Face shields
- Goggles
- Shoe covers
- Head covers, etc.

PPE location will be explained by clinical faculty member or preceptor at the Health Care Agency to which the student is assigned.

INFECTION CONTROL PRACTICES

All students using PPE must observe the following precautions:

1. Wash hands immediately or as soon as feasible after removing gloves or other PPE.
2. Remove PPE after it becomes contaminated and before leaving the work area.
3. Dispose of used PPE in the appropriate receptacle.
4. Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.

5. Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
6. Never wash or decontaminate disposable gloves for reuse.
7. Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
8. Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

Housekeeping

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section “Labels”), and closed prior to removal to prevent spillage or protrusion of contents during handling.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded (RED or ORANGE-RED).

Sharps disposal containers are easily accessible and as close as feasible to the immediate area where sharps are used.

Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

Laundry

The following laundering requirements must be met:

Handle contaminated laundry as little as possible, with minimal agitation.

Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use either red bags or bags marked with the biohazard symbol for this purpose.

Wear the following PPE when handling and/or sorting contaminated laundry:

Gloves

Gown

Labels

Follow the labeling methods used at the Health Care Agency:

Students are to notify the clinical faculty member or preceptor if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

HEPATITIS B VACCINATION

All students having exposure to blood or other potentially infectious materials will be required to provide written proof of the Hepatitis B vaccination series OR complete the Hepatitis B Declination Form (Appendix A) prior to initial assignment for Vaccination is encouraged unless:

Documentation exists that the student has previously received the series

Antibody testing reveals that the student is immune

Medical evaluation shows that vaccination is contraindicated.

However, if a student declines the vaccination, the student must sign a declination form (Appendix A). Documentation of refusal of the vaccination is kept at the School of Nursing and Health Studies.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, the student should immediately notify the clinical faculty member or preceptor who is responsible for the learning experience in which the student is engaged.

Again, prompt reporting of all exposures is crucial to ensure that proper medical evaluation and treatment, if applicable, is initiated in a timely manner.

Unless extraordinary circumstances are present, the clinical faculty member or preceptor shall assist the student in shedding contaminated clothing, wiping/washing off visible blood and/or body fluids and disinfecting the area exposed in an acceptable manner (i.e. a skin-approved bactericidal soap, a waterless cleaner, etc.) Care should be taken not to use abrasives or cleaners that will damage the skin. If blood and/or other body fluids are splashed in the eye or mucous membrane, flush the affected area vigorously with running water.

An immediately available confidential medical evaluation and follow-up will be conducted by the Health Care Agency to which the student is assigned. Contact in the following order to arrange for the student to be evaluated: 1) UHealth Workmen's Comp Clinic (305) 689-5891; 2) University of Miami's Employee Health Office (305) 243-3267; 3) Physician's Health Center (305) 279-7722; 4) UMH ER (305) 689-5464; 5) UM Employee Health Nurse pager (305) 750-0525 . In the event of a life threatening emergency, call 911. Student should be taken to the nearest Emergency Room. If the Health Care Agency where the exposure incident has occurred is unable or unwilling to perform the medical evaluation, testing and/or treatment, OR if the exposure has occurred after hours or on weekends, the clinical faculty or preceptor should call the "On-Call Employee Health Nurse" at beeper# (305) 750-0525 for further instructions. Once initial evaluation and treatment is administered, the student contacts UM Employee Health for the necessary post-exposure follow-up.

UM Employee Health Office Contact Information

Pager: 305-750-0525 (Pager for On-Call Employee Health Nurse)

Office: 305-243-3272

Address: 1400 NW 10th Ave,

Dominion Tower, Suite 405

Miami, FL 33136

REPORTING OF INCIDENT

The clinical faculty member or preceptor shall assist the student in completing the “Accident Report Form (ARF) located online at:

http://www6.miami.edu/UMH/CDA/UMH_Main/0,1770,2467-1;36958-3,00.html.

It is very important that the clinical faculty or preceptor fill this form out together with the student within 24 hours of the incident. Upon completing the ARF, the form should be printed (BEFORE SUBMITTING ONLINE TO RISK MANAGEMENT), and signed by both the clinical faculty or preceptor and the student. The clinical faculty or preceptor should then fax the signed ARF to (305) 284-3405, Attention: Pilar Schuitema, Risk Management Office. All pertinent information may be added to the ARF as this will assist Ms. Schuitema in the follow-up management of the incidence.

The clinical faculty or preceptor should notify the Associate Dean for MSN Programs within 24 hours after the incident has occurred.

Additional Resources

There is a 24-hour nationwide Post Exposure Prophylaxis hotline at 1-888-HIV-4911 (1-888-448-4911) if there are any questions or concerns about the exposure incident, evaluation or treatment.

As part of the medical evaluation, the following activities may be performed:

1. Document the routes of exposure and how the exposure occurred.
2. Identify and document the source individual (unless it can be established that identification is infeasible or prohibited by state or local law).
3. Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the student's health care provider.
4. If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.

5. Assure that the exposed student is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
6. After obtaining consent, collect exposed student's blood as soon as feasible after exposure incident, and test blood for HIV, HBV, and HCV serological status
7. If the student does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed student elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

Costs of Post Exposure Evaluation

All costs related to the evaluation, testing and standard treatment after an exposure incident shall be covered by the University of Miami through an insurance policy maintained by the School of Nursing and Health Studies subject to limits and exclusions set forth in such policy. Costs incurred from services rendered by the UM Employee Health Office and/or other healthcare facilities that is not covered under such policy will be the responsibility of the University of Miami's School of Nursing and Health Studies.

COMPUTER LAB

A computer lab is located on the first floor of the M. Christine Schwartz Center. The hours of operation are: Monday - Friday, from 8:00 AM - 5:30 PM. A list of the University of Miami Computing Center Labs is located at <http://www.it.miami.edu/labs/>.

GRADUATE STUDENT ORGANIZATIONS (GSA)

The Graduate Student Association (GSA) is the student government organization representing students in the Graduate School, including graduate students in the School of Architecture, College of Arts and Sciences, School of Business Administration, School of Communication, School of Continuing Studies, School of Education, College of Engineering, School of International Studies, School of Medicine, School of Music, School of Nursing and Health Studies, and the Rosenstiel School of Marine and Atmospheric Sciences. Established in 1969, the GSA is one of the oldest graduate student governments in the United States. The primary function of the GSA is to provide the means for responsible and effective graduate student participation in the planning and conduct of University affairs. The GSA serves as liaison between graduate students, individually and collectively, the faculty and the administration. In addition, the GSA exists as a social and intellectual forum to support and improve the quality of the graduate student environment at the University of Miami. Visit their Home page at www.miami.edu/gsa.

School of Nursing and Health Studies Committees Students are elected to serve on the **Curriculum Committee of the School of Nursing and Health Studies. The election process is accomplished during the beginning of the Fall Semester. Students may also be asked to serve on ad hoc committees as necessary.**

The following School of Nursing and Health Studies Standing Committee student membership:

Curriculum Committee

The Curriculum Committee is responsible for developing, implementing, and evaluating the curriculum of the different program areas of the School of Nursing and Health Studies.

SIGMA THETA TAU INTERNATIONAL HONOR SOCIETY OF NURSING (BETA TAU CHAPTER)

The purposes of Sigma Theta Tau International Honor Society of Nursing (STTI) are to:

1. Recognize superior academic achievement.
2. Recognize the development of leadership qualities.
3. Foster high professional standards.
4. Strengthen commitment to the ideals and purposes of the professions.

Masters students with a GPA of 3.5 and who have completed a minimum of one-fourth of their required program are eligible for invitation for membership in STTI. Recognized nursing leaders in the community who hold Baccalaureate degrees are also invited to join. Invited applicants are required to submit an intent form and two endorsements. Both endorsements must be members of Sigma Theta Tau and one is to be from a faculty member. Invitations for membership into STTI are mailed to eligible students in February of each year with annual induction in May of each year.

GRADUATION

Applying for Graduation

It is the individual responsibility of each student who is entering the semester of graduation to apply in myUM for graduation according to the deadlines on the University's academic calendar. Please note that students graduating in a summer semester, apply for graduation at the same time as students graduating in the spring semester. Students graduating in a summer semester may participate in the spring commencement ceremony.

Graduation Clearance

After the student's final semester of enrollment, provided he or she has applied for graduation, the Graduate School will review the student's file and coursework and confer the degree. This process may take several weeks so students must periodically check myUM to verify when the degree has been posted.

School Of Nursing and Health Studies Recognition

The School of Nursing and Health Studies holds a Recognition Ceremony on the same day as graduation in both December and May. Details will be announced prior to the end of each semester for this very important ceremony.

IMPORTANT PHONE NUMBERS

Dean of the School of Nursing and Health Studies, Dr. Nilda (Nena) P. Peragallo...	305-284-2107
Vice Dean, Senior Assoc. Dean Academic Programs – Dr. Doris Ugarriza.....	305-284-1551
Associate Dean for Master’s Programs, Dr. Todd Ambrosia.....	305-284-4089
Coordinator Admissions and Registration – Marty Medina.....	305-284-4732
Academic Development.....	305-284-2800
Accessibility Resources.....	305-284-2374
Continuing Studies.....	305-284-4000
Counseling Center.....	305-284-5511
Financial Assistance Services.....	305-284-5212
International Student and Scholar Services.....	305-284-2928
<i>Miami Hurricane</i>	305-284-4401
Multicultural Student Affairs.....	305-284-2855
Public Safety.....	305-284-6666
Residence Halls Office.....	305-284-4505
Rumor Control.....	305-284-5151
Student Accounts.....	305-284-6430
Student Activities.....	305-284-6399
Student Health Services.....	305-284-5927
Student Life and University Center.....	305-284-2805
Testing Center.....	305-284-2450
Toppel Center for Career Planning and Placement.....	305-284-5451
Graduate Student Association.....	305-284-6750
Wellness and Recreation.....	305-284-3253
Hurricane Hot Line.....	305-284-5151
Hurricane (Weather) Announcements:.....	WVUM - FM - 90.5
.....	WIAZ - AM - 610
.....	WTAL - FM - 94.6
Storm Updates.....	www.miami.edu/prepare
University of Miami Radio Station:.....	WVUM - FM - 90.5
University Website:.....	www.miami.edu
Writing Center.....	305-284-2956
University Chaplains:	
St. Augustine Catholic Church/Student Center.....	305-661-1648
Baptist Campus Ministry.....	305-667-1066
Christian Science Organization.....	305-667-0703
Episcopal Church Center.....	305-661-4859
Hillel Jewish Student Center.....	305-665-6948
Wesley Foundation (United Methodist).....	305-661-1695

Plan of Study: Nurse Anesthesia

Fall I	Nurse Anesthesia Plan	Total Credits	Class Credits	Clinical Credits	Clinical Hours
NUR 611	Foundations of Anesthesia Science for Nurse Anesthetists	3	3	0	
NUR 601	Advanced Pharmacology	3	3	0	
NUR 612	Physiology/Pathophysiology for Advanced Practice Nursing	3	3	0	
NUR 613	Advanced Health Assessment & Diagnostic Reasoning	3	2	1	28*
	Total for semester	12	11	1	
Spring I					
NUR 608	Concepts in Advanced Practice Nursing	3	3	0	
NUR 614	Basic Concepts in Anesthesia Nursing, 12 Clin/wk	6	3	3	168
NUR 617	Pharmacology for Anesthesia Nursing	3	3	0	
NUR 630	Research & Evidence Based Practice Nursing	3	3		
	Total for semester	15	12	3	168
Summer I					
NUR 609	Professionalism in Advanced Practice Nursing	2	2	0	
NUR 619	Advanced Concepts in Anesthesia Nursing I, 40 hr/wk	13	3	10	560
	Total for semester	15	5	10	560
Fall II					
		Total Credits	Class Credits	Clinical Credits	Clinical Hours
NUR 615	Professional Aspects of Anesthesia Nursing	2	2	0	0
NUR 620	Advanced Concepts in Anesthesia Nursing II, 44hr/wk	14	3	11	616
	Total for semester	16	5	11	616
*Lab practicum (Lab practicum hours are not included in the total)					
	Internship I, 44 hr/wk		3	11	616
	Total for semester	14	3	11	616
Summer II					
NUR 646	Interdisciplinary Anesthesia Nursing Internship II	14	3	11	616

	Total for semester	14	3	11	616
Fall III					
NUR 650	Interdisciplinary Anesthesia Nursing Internship III	14	3	11	616
	Total for semester	14	3	11	616
	Total Program	100	42	58	3,192

App. CC 1/12/10
App. SC 4/7/10

Plan of Study: Acute Care/Adult Nurse Practitioner

Clinical Hours Acute Care		Clinical Hours Adult	
NUR 631	56 hours*	NUR 628	112 hours
NUR 622	168 hours	NUR 631	224 hours
NUR 639	280 hours	NUR 624R	168 hours
Acute Care total	504**	Adult total	504**

*631 hours split between adult & acute care

** 613 Advanced assessment hours covers both specialties (these hours not included in total)

Fall I	AC/Adult 1-Year Plan	Total Credits	Class Credits	Clinical Credits	Clinical Hours
NUR 601	Advanced Pharmacology	3	3	0	0
NUR 612	Advanced Pathophysiology	3	3	0	0
NUR 613	Advanced Health Assessment & Diagnostic Reasoning	3	2	1	28*
NUR 628	Adult I	4	2	2	112
		13	10	3	112
Spring I					
NUR 608	Concepts	3	3	0	
NUR 616	Pharmacology for Acute Care	3	3	0	
NUR 631	Adult II	7	2	5	280
		13	8	5	280
Summer I					
NUR 609	Professionalism in Advanced Practice Nursing	2	2	0	
NUR 622	Acute Care Nursing for Adults	4	1	3	168
NUR 630	Research and Evidence-Based Advanced Practice Nursing	3	3	0	
NUR 621	Diagnostics & Therapeutic	2	2	0	

	Interventions				
		11	8	3	168
Fall II					
NUR 639	Acute Care Nursing of Adults II	7	2	5	280
NUR 624	Care of the Elderly Adult	4	1	3	168
		11	3	8	448
	Total Program	48	29	19	1008
Fall I	AC/Adult 2-Year Plan	Total Credits	Class Credits	Clinical Credits	Clinical Hours
NUR 601	Advanced Pharmacology	3	3	0	0
NUR 612	Advanced Pathophysiology	3	3	0	0
		6	6	0	0
Spring I					
NUR 608	Concepts in Advanced Practice Nursing	3	3	0	0
NUR 630	Research Methods and Evidence-Based Advanced Practice Nursing	3	3	0	0
		6	6	0	0
Summer I					
NUR 609	Professionalism in Advanced Practice Nursing	2	2	0	0
		2	2	0	0
Fall II					
NUR 613	Advanced Health Assessment & Diagnostic Reasoning	3	2	1	28*
NUR 628	Adult I	4	2	2	112
		7	4	3	112
Spring II					
NUR 616	Pharmacology for Acute Care	3	3	0	0
NUR 631	Adult II	7	2	5	280
		10	5	5	280
Summer II					
NUR 622	Acute Care Nursing for Adults	4	1	3	168
NUR 621	Diagnostics & Therapeutic Interventions	2	2	0	0

		6	3	3	168
Fall III					
NUR 639	Acute Care Nursing of Adults II	7	2	5	280
NUR 624	Care of the Elderly Adult	4	1	3	168
	Total Semester IV	11	3	8	440
	Total Program	48	29	19	1008

Plan of Study: Family Nurse Practitioner

Fall I	Family Nurse Practitioner 1-Year Plan	Total Credits	Class Credits	Clinical Credits	Clinical Hours
NUR 601	Advanced Pharmacology	3	3	0	
NUR 612	Physiology/Pathophysiology for Advanced Practice Nursing	3	3	0	
NUR 613	Advanced Health Assessment & Diagnostic Reasoning	3	2	1	28*
NUR 628	Advanced Practice Nursing of the Adult I	4	2	2	112
		13	10	3	112
Spring I					
NUR 608	Concepts in Advanced Practice Nursing	3	3	0	
NUR 623	Primary Health Care of Infants and Children	3	2	1	56
NUR 627	Primary Prenatal Health Care of Women	2	1	1	56
NUR 631	Advanced Practice Nursing of the Adult II	4	2	2	112
		12	8	4	224
Summer I					
NUR 609	Professionalism in Advanced Practice Nursing	2	2	0	
NUR 647	Advanced Practice Nursing Integration	7	2	5	280
NUR 630	Research Methods and Evidence-Based Practice	3	3	0	
		12	7	5	280
	Total Program	37	25	12	616
Fall I	Family Nurse Practitioner 2-Year Plan	Total Credits	Class Credits	Clinical Credits	Clinical Hours
NUR 601	Advanced Pharmacology	3	3	0	0

NUR 612	Physiology/ Pathophysiology for Advanced Practice Nursing	3	3	0	0
		6	6	0	0
Spring I					
NUR 608	Concepts in Advanced Practice Nursing	3	3	0	0
NUR 630	Research Methods and Evidence-Based Practice	3	3	0	0
		6	6	0	0
Summer I					
NUR 609	Professionalism in Advanced Practice Nursing	2	2	0	0
		2	2	0	0
Fall II					
NUR 613	Advanced Health Assessment & Diagnostic Reasoning	3	2	1	0
NUR 628	Advanced Practice Nursing of the Adult I	4	2	2	112
		7	4	3	112
Spring II					
NUR 623	Primary Health Care of Infants and Children	3	2	1	56
NUR 627	Primary Prenatal Health Care of Women	2	1	1	56
NUR 631	Advanced Practice Nursing of the Adult II	4	2	2	112
		9	5	4	224
Summer II					
NUR 647	Advanced Practice Nursing Integration	7	2	5	280
	Total Semester IV	7	2	5	280
	Total Program	37	25	12	616

*Lab hours are not included in Clinical hours

Plan of Study: Nurse Educator

Semester Schedule	Courses	Total Credits	Class Credits	Clinical Credits	Clinical Hours
Fall # 1	NUR 640 (MSN) or NUR 551 (Certificate): Teaching and Learning Theory in Clinical Nursing Education	3	3	0	0
	NUR 641 (MSN) or NUR 553 (Certificate): Methods for Clinical Nursing Education	3	3	0	0
Spring # 1	NUR 642 (MSN) or NUR 555 (Certificate): Evaluation in Clinical Nursing Education	3	3	0	0
	NUR 644 (MSN): Leadership and Professional Development in Nursing	3	3	0	0
Fall # 2	NUR 643 (MSN) or NUR 558 (Certificate) : Practicum in Nursing Education	6	3	3	168
Spring # 2	NUR 608: Concepts for Advanced Practice	3	3	0	0
	NUR 630: Research Methods & Evidence-based Practice	3	3	0	0
Summer Course	Graduate student "Boot Camp"	0	0	0	0
Fall # 3	NUR 612: Physiology/Pathophysiology for Advanced Practice Nursing	3	3	0	0
	NUR 613: Advanced Health Assessment	3	2	1	28
Total Credits		30	26	4	196

App. CC 4/30/08
App. SC 5-7-08